## **INCOME& EXPENSE DATA WORKSHEET** FOR THE 2021 BURLINGTON REASSESSMENT PROJECT

Annual Income and Expense Statement	MAP ID:									
for the year ending:	PROPERTY ADDRESS	:								
PROPERTY USE (check all that apply):	Apartment	Office	Retail	Mixed Use	Shopping Center	Industrial	Other			
CHECK HERE IF ANY PART OF THIS PRO	PERTY IS OWNER OCC	CUPIED:								
1. Total gross building area										
(Including owner-occupied space)				Sq. Ft.	5. Number of parking spa	aces				
2. Owner-occupied area				Sq. Ft.	6. Actual Year Built, if kn	own				
3. Net Leasable area				Sq. Ft.	7. Year Remodeled					
4. Number of rental units, including owner-	-occupied									
ACTUAL GROSS INCOME *					LESS, ACTUAL EXPENSE	S				
9. Apartment Rents (From Schedule A)					21. Heating fuel					
10. Office Rents (From Schedule B)					22. Gas and electricity					
11. Retail Rents (From Schedule B)					23. Water and sewer					
12. Mixed Rents (From Schedule B)					24. Other utilities					
13. Shopping Center Rents (From Schedule	B)				25. Payroll (do not includ	e management)				
14. Industrial Rents (From Schedule B)					26. Supplies					
15. Other Rents (From Schedule B)					27. Management					
16. Parking Rents					28. Insurance					
17. Other Misc income (e.g. CAM, INS or TA	AX Reimbursement)				29. Common Area Maint	enance				
18. TOTAL ACTUAL GROSS INCOME =					30. Leasing Fees/Commi	ssions/Advertising				
19. Less, losses from vacancy and credit co	ollection				31. Legal and Accounting	5				
20. EFFECTIVE GROSS ANNUAL INCOMI	E =				32. Elevator maintenanc	e				
					33. Tenant improvement	ts				
* Do not include estimates for vacanci	ies				34. General repairs					
					35. Other (specify)					
Poturn by omail: commor	cialaccaccar@b	urlingtor	nut cov		36. Other (specify)					
Return by email: commer	ciaiassessui@b	uringtoi		37. Other (specify) _						
					38. Reserves					
Return Address:					39. Security					
Assessor's Office					40. TOTAL ACTUAL EXP	PENSES =				
149 Church Street					41. NET OPERATING IN	ICOME =				
Burlington, VT 05401					DO NOT INCLUDE TAXES, D	DEPRECIATION OR MORTGAG	E PAYMENTS AS AN EXPENSE			

PROPERTY ADDRESS: _										
SCHEDULE A - APARTM	IENT RENT	SCHEDU	ILE							
<u>Unit Type</u>		No. Of U	<u>Jnits</u>		<u>Unit Size</u>	Monthly	Rent	<u>Typical</u> <u>Lease Term</u>	~ Complete this section for apo	artment rentals only ~
	Total	Rented	Rooms	Baths	Sq. Ft.	Per Unit	Total		ITEMS INCLUDED	IN RENT
Efficiency									(Check all that	apply)
1 Bedroom									□Heat	☐ Furnishings
2 Bedroom										· ·
3 Bedroom									☐ Electricity	☐ Security
4 Bedroom									□ Other utilities	□ Pool
Other rentable units									☐ Air conditioning	
Owner/manager occupied										☐ Tennis courts
Subtotal									☐ Stove/Refrigerator	□ Parking
Parking									□ Dishwasher	☐ Garbage disposal
Other income (specify)									☐ Other (specify):	3 1
TOTAL		-					-		_ circ. (specify).	

## SCHEDULE B - OTHER NON-APARTMENT RENT SCHEDULE

~ Complete this section for all other rental areas, <u>except</u> for apartments ~

Tenant Name	<u>Floor</u> <u>Location</u>		<u>Lease Terms</u>			Annual Rent		<u>Parking</u>		Interior Finish		
		Start Date	End Date		Base Mthly Rent \$	Escal/CAM/ Overage	Total Rent \$			Owner Provided	Tenant Provided	If Owner Provided, \$ Cost to Fit Up/Renovate
TOTAL												

## COPY AND ATTACH IF ADDITIONAL PAGES ARE NEEDED

## **PURCHASE PRICE VERIFICATION**

 $^{\sim}$  Complete this section if the property was purchased within the last 10 years  $^{\sim}$  ALL OWNERS MUST SIGN AND DATE THE ATTESTION BELOW  $^{\sim}$ 

Purchase Price	\$	Down Payment: \$		Purchase Date:					
Selling Broker: Date of Last Appraisal:		Broker Telephone #:Appraisal Firm:		Appraised Value:	<u> </u>				
First Mortgage:	\$	Interest Rate:	Payment % ScheduleTerm:	Years	□ Fixed □ Variable				
Did the purchase p	price include monies allocat	ed for: Furniture? \$	Equipment? \$	Other? \$					
	TION:		IMATE OF REPAIRS NEEDED AT 1	THE TIME OF SALE: \$					
If yes, provide list	price: \$	Date listed:	Listing broker:	Br	oker's Telephone#:				
		mstances, or extraordinary factors t or any other helpful information or c		e.g., vacancy, seller motivation,	conditions of sale, property condition,				
Signature:			Name (Print):		Date:				
Title:			Telephone#:						